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Bib Data Sheet

CONFIRMATION NO. 8052

SERIAL NUMBER 09/822,709	FILING DATE 03/30/2001 RULE	CLASS 711	GROUP ART UNIT 2188	ATTORNEY DOCKET NO. EMC-005PUS
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APPLICANTS

Ananthan K. Pillai, East Norwood, MA;

Madhav Mutalik, Southborough, MA;
 Cara Garber, Franklin, MA; Ajay Shekhar, Medway, MA;

M.M. ** CONTINUING DATA ***** *now*

now ** FOREIGN APPLICATIONS ***** *now*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 05/08/2001

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY MA	SHEETS DRAWING 8	TOTAL CLAIMS 16	INDEPENDENT CLAIMS 4
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	Verified and Acknowledged <i>M.M.</i> Examiner's Signature Initials			

ADDRESS

22494
 DALY, CROWLEY & MOFFORD, LLP
 SUITE 101
 275 TURNPIKE STREET
 CANTON, MA
 02021-2310

TITLE

METHOD AND APPARATUS FOR COMPUTING FILE STORAGE ELEMENTS FOR BACKUP AND RESTORE

FILING FEE RECEIVED 876	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other
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